BACKGROUND SURVEY QUESTIONNAIRE 79-2

GENERAL INSTRUCTIONS			PRIVACY ACT INFORMATION
The information from this survey is used to help insure that agency personnel practices meet the requirements of Federal law. Your responses are voluntary. Please answer each of the questions to the best of your ability. Please print entries in pencil or pen. Use only capital letters. Read each item thoroughly before completing the appropriate code number in each box. Name (Last, First, MI) Position for which you are applying Date (Month, Day, Year)			GENERAL This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974). December 31, 1974, for individuals completing Federal records and forms that solicit personal information. AUTHORITY Sections 1302, 3301, 3304, and 7201 of Title 5 of the U.S. Code. PURPOSE AND ROUTINE USES The information from this survey is used for research and for a Federal equal opportunity recruitment program to help insure that agency personnel practices meet the requirements of Federal law. Address guestions concerning this form and its uses to the Director, PRDC, Office of Personnel Management, Washington, D. C. 20415. EFFECTS OF NONDISCLOSURE Providing this information is voluntary. No individual personnel selections are made based on this information. INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579, SECTION 7 (b) Solicitation of the Social Security Number (SSN) by the Office of Personnel Management is authorized under provisions of Executive Order 9397, dated November 22, 1943. It is used to relate this form with other records that you like with Federal agencies and the Office of Personnel Management.
Social Security Number 2. Year of		2. Year o	
	77,000.00	 -	1 - Yes
4. How did you learn about the	(CC 1-9)		(CC 10-11) (CC 12) 2 - No
(You may select up to three of the control of the c	e e (Unemployment C Bulletin Board or	1 1 1: 1: 1: Office) 1: Other Ann	10 — Agency or other Federal Government Recruitment at School or College 11 — Federal, State or Local Job Information Center 12 — Religious organization 13 — School or College Counselor or other official 14 — Friend or Relative Working for Agency 15 — Friend or Relative not Working for Agency 16 — Other (Specify) — F-mail
ETHNICITY: Hispanic. A person of Mexican, I RACE: American Indian or Alaskan Nati identification through tribal affil Asian or Pacific Islander. A pers or the Pacific Islands. This area Black. A person having origins	ve. A person having ation or community on having origins in includes, for example and of the black	nd administration, Central or gorigins in a recognition and of the collection racial or one	original peoples of the Far East, Southeast Asia, the Indian subcontinent,
A. Race 1—American Indian 2—Asian or Pacific Is 3—Black 4—White FOR AGENCY USE ONLY Date Received (Mo., Day, Yr) S	slander	(B. Sex 1 - Male 2 - Female (CC 20) 1 - Hispanic Origin 2 - Not of Hispanic (CC 21) Origin Occupation Series Code Agency Code Location
(CC 22-27) o Be Reproduced Locally	(CC 28-31)		(CC 32-36) (CC 37-40) (CC 41-44) OPM Form 1366 (10/79)